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|----------|--|--------|----------|----------|--|
| 09991807 | | 500872 | 00000071 | JALAXAND | |
|----------|--|--------|----------|----------|--|

☐ Please consider the arguments in the Appeal Brief or Reply Brief under 37 C.F.R. § 1.116 previously filed on ____.

☐ Other ____.

b. Enclosed are:

☒ **Reply Accompanying RCE.**

☐ Affidavit(s)/Declaration(s).

☒ **Information Disclosure Statement Under 36 CFR §1.56.**

☒ **Form PTO/SB/08 with copies of 12 listed reference(s).**

☐ Other .

Miscellaneous:

☐ Suspension of action of the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of ____ months.

The filing fee is calculated below:

| | Claims as Amended | Previously Paid For | Extra Claims Present | Rate | Fee Totals |
|--|-----------------------------|---------------------|----------------------|--------------|------------|
| RCE Fee 1.17(e) | | | | \$770.00 | \$770.00 |
| Total Claims: | 34 <input type="checkbox"/> | 32 | = 2 | x \$18.00 = | \$36.00 |
| Independents: | 4 <input type="checkbox"/> | 4 | = 0 | x \$86.00 = | \$0.00 |
| First presentation of any Multiple Dependent Claims: | | | | + \$290.00 = | \$0.00 |
| CLAIMS FEE TOTAL: | | | | | = \$806.00 |

- ☐ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

| | | | | |
|-------------------------------------|---|------------|---|-----------------|
| <input type="checkbox"/> | Extension for response filed within the first month: | \$110.00 | 0 | \$0.00 |
| <input type="checkbox"/> | Extension for response filed within the second month: | \$420.00 | | \$0.00 |
| <input type="checkbox"/> | Extension for response filed within the third month: | \$950.00 | | \$0.00 |
| <input type="checkbox"/> | Extension for response filed within the fourth month: | \$1,480.00 | | \$0.00 |
| <input type="checkbox"/> | Extension for response filed within the fifth month: | \$2,010.00 | | \$0.00 |
| | EXTENSION FEE SUBTOTAL: | | | \$0.00 |
| | EXTENSION FEE ALREADY PAID: - | | | \$0.00 |
| | EXTENSION FEE TOTAL | | | \$0.00 |
| | CLAIMS AND EXTENSION FEE TOTAL: | | | \$806.00 |
| <input checked="" type="checkbox"/> | Small Entity Fees Apply (subtract ½ of above): | | | \$403.00 |
| <input type="checkbox"/> | Suspension of action requested under 37 C.F.R. § 1.103(c) | | | \$0.00 |
| | TOTAL FEE: | | | \$403.00 |

☐ Please charge Deposit Account No. 50-0872 in the amount of A duplicate copy of this transmittal is enclosed.

- ☒ **Two checks in the amounts of \$385.00 for the filing fee and \$18.00 for the claims fee are enclosed.**

- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date: November 4, 2003

By 

FOLEY & LARDNER

Customer Number: 23392

Telephone: (310) 975-7964

Facsimile: (310) 557-8475

Ronald Coslick
Attorney for Applicant
Registration No. 36,489